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FACSIMILE TRANSMITTAL

TO

Name: USPTO

Date: January 26, 2006

Fax No.: 571.273.8300

Subject: U.S. Application Number 10/693,082

FROM

Name: Jay A. Stelacone

Phone No.: 410-741-0973

Fax # Verified by: JAS

Pages (incl. this): 5

Attorney Docket No.: 0023.0017

PLEASE DATE-STAMP TO ACKNOWLEDGE RECEIPT OF THE FOLLOWING:

In Re Application of: Wilmer L SIBBITT, Jr.

Application No.: 10/693,082

Group Art Unit: 3763

Filed: October 27, 2003

Examiner: Cris Rodriguez

For: COLORFUL SHIELDED RECIPROCATING BUTTERFLY NEEDLE

1. Transmittal Form (1 page)
2. Revocation of Power of Attorney, Grant of New Power of Attorney, and Change of Correspondence Address (2 pages)
3. Change of Attorney Docket Number (1 page)

Due Date: N/A

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PTO/SB/21 (09-04) (modified)
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TRANSMITTAL FORM

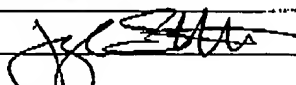
(to be used for all correspondence after initial filing)

| | | |
|---|----------|---|
| Application Number | | 10/693,082 |
| Filing Date | | October 27, 2003 |
| First Named Inventor | | Wilmer L. SIBBITT, Jr. |
| Art Unit | | 3763 |
| Examiner Name | | Cris Rodriguez |
| Total Number of Pages in This Submission | 4 | Attorney Docket Number 0023.0017 |


ENCLOSURES (Check all that apply)

| | |
|--|--|
| <input type="checkbox"/> Fee Transmittal (pages) <input type="checkbox"/> Credit Card Payment Form (pages) <input type="checkbox"/> Reply to Office Action (pages) <input type="checkbox"/> After Final <input type="checkbox"/> Petition for Extension of Time – month(s) (pages) <input type="checkbox"/> Information Disclosure Statement (2 pages) <input type="checkbox"/> Form PTO/SB/08A (1 page) <input type="checkbox"/> Copy(ies) of Document(s) Listed on Form PTO/SB/08A (pages) <input type="checkbox"/> Response to Notice to File Missing Parts (pages) <input type="checkbox"/> Fully-Executed Declaration (pages) <input type="checkbox"/> Copy of Notice (pages) <input type="checkbox"/> Assignment Cover Sheet (pages) <input type="checkbox"/> Fully-Executed Assignment (pages) <input checked="" type="checkbox"/> Revocation of Power of Attorney, Grant of New Power of Attorney, and Change of Correspondence Address (2 pages) | <input type="checkbox"/> Drawings – FIGS. 1- (pages) <input type="checkbox"/> Petition (pages) <input type="checkbox"/> Terminal Disclaimer (pages) <input type="checkbox"/> Request for Refund (pages) <input type="checkbox"/> After Allowance Communication (pages) <input type="checkbox"/> Notice of Appeal (pages) <input type="checkbox"/> Appeal Brief (pages) <input type="checkbox"/> Status Inquiry (pages) <input checked="" type="checkbox"/> Change of Attorney Docket Number (1 page) <input type="checkbox"/> Other Enclosure(s): |
| Remarks: | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|---------------------|---|-----------------|--------|
| Firm Name | Law Office of Thomas M. Isaacson | | |
| Signature |  | | |
| Printed Name | Jay A. Stelacone | | |
| Date | January 26, 2006 | Reg. No. | 42,168 |

CERTIFICATE OF FACSIMILE TRANSMISSION

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| I hereby certify that this Transmittal Form and the above-identified correspondence are being facsimile transmitted to the USPTO's Central FAX Number (571-273-8300) on the date shown below: | | | |
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| Typed or printed name | Jay A. Stelacone | Date | January 26, 2006 |

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PATENT
Customer No. 40271
NEW Attorney Docket No. 0023.0017

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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|-----------------------------|---|--------------------------|
| In re Application of: |) | |
| |) | |
| Wilmer L. SIBBITT, Jr. |) | Group Art Unit: 3763 |
| |) | |
| Application No.: 10/693,082 |) | Examiner: Cris Rodriguez |
| |) | |
| Filed: October 27, 2003 |) | |
| |) | Confirmation No. 8459 |
| For: COLORFUL SHIELDED |) | |
| RECIPROCATING BUTTERFLY |) | |
| NEEDLE |) | |

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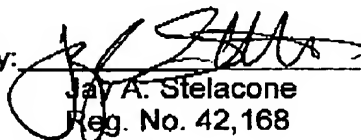
Sir:

CHANGE OF ATTORNEY DOCKET NUMBER

Effective immediately, please change the Attorney Docket No. for the above-captioned application from "UNME-0142-1" to --0023.0017--.

Respectfully submitted,

Dated: January 26, 2006

By: 
Jay A. Stelacone
Reg. No. 42,168